10/591701 IAP9 Rec'd PCT/PTO 05 SEP 2006

APPLICATION DATA SHEET

Application Information	
Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	METHOD AND DEVICE FOR CHARTERISATION OF MULTIPLE SAMPLES OF ONE OR VARIOUS DISPERSIONS
Attorney Docket Number::	1033415-000002
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No

Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Dietmar
Middle Name::	
Family Name::	LERCHE
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Teutonenstrasse 20a
City of Mailing Address::	Berlin
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing	12524

Page # 2

Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Titus
Middle Name::	
Family Name::	SOBISCH
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Apollostrasse 20a
City of Mailing Address::	Berlin
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	12526
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Torsten
Middle Name::	
Family Name::	DETLOFF

·	
Name Suffix::	
City of Residence::	Güstrow
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Hansenstrasse 3
City of Mailing Address::	Güstrow
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	18273
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Frank
Middle Name::	
Family Name::	BABICK
Name Suffix::	
City of Residence::	Dresden
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Bärwalder Strasse 3
City of Mailing Address::	Dresden
State or Province of Mailing Address::	

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing

Address::

01127

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: STINTZ

Name Suffix::

City of Residence:: Dresden

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Alpenstrasse 1

City of Mailing Address:: Dresden

State or Province of Mailing

Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing

Address::

01326

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: 703 836 6620

Fax Number: 703 836 2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing

Date::

This Application National Stage of PCT/EP2005/050988 03/04/05

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority

Claimed::

Germany 10 2004 011 387.4 03/05/04 Yes

Assignee Information

Assignee Name:: L.U.M. GESELLSCHAFT FÜR LABOR-,

UMWELTDIAGNOSTIC & MEDIZINTECHNIC

mbH

Street of Mailing Address:: Rudower Chaussee 29

City of Mailing Address:: Berlin

State or Province of Mailing

Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing

Address::

12489